Signature

March 9, 2001

Dated:

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| Please type a plus sign (+) inside this box → + | . 4 to | PTO/SB/05 (4/98 Approved for use through 09/30/2000. OMB 0651-003/ Patent and Trademark Office: U.S. DEPARTMENT OF COMMERC |
|--|----------------------|--|
| | | nond to a collection of information unless it displays a valid OMB control number they Docket No. 285-148 |
| UTILITY | | Inventor or Application Identifier Arthur A. Alfaro et al. |
| PATENT APPLICATION | | ANTERIOR LUMBAR SPACER |
| TRANSMITTAL | | |
| Only for new nonprovisional applications under 37 C F.R. § 1 53(t | Expre | ess Mail Label No. EL765222306US |
| APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application conte | nts. | Assistant Commissioner for Patents ADDRESS TO: Box Patent Application Washington, DC, 20231 |
| * Fee Transmittal Form (e.g., PTO/SB/17) | | 5. Microfiche Computer Program (Appendix) |
| (Submit an original and a duplicate for fee processing) Total Pages 12 | —], | Nucleotide and/or Amino Acid Sequence Submission |
| 2. Specification [Total Pages 14 (preferred arrangement set forth below) | | (if applicable, all necessary) |
| - Descriptive title of the Invention | | a. Computer Readable Copy |
| - Cross References to Related Applications | | b. Paper Copy (identical to computer copy) |
| Statement Regarding Fed sponsored R & D Reference to Microfiche Appendix | | c. Statement verifying identity of above copies |
| - Background of the Invention | | ACCOMPANYING APPLICATION PARTS |
| - Brief Summary of the Invention | | 7. Assignment Papers (cover sheet & document(s)) |
| - Brief Description of the Drawings (if filed) | | 37 C.F.R.§3.73(b) Statement Power of |
| - Detailed Description | | 8. (when there is an assignee) Attorney |
| - Claim(s) | | 9. English Translation Document (if applicable) |
| - Abstract of the Disclosure 3. Total Sheets 2 |]1 | 10. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations |
| 4. Oath or Declaration Total Pages | =, | 11. Preliminary Amendment |
| | ' | Return Receipt Postcard (MPEP 503) |
| a. Newly executed (original or copy) | \$ 1 62/6 | (Should be specifically itemized) |
| b. Copy from a prior application (37 C.F.R (for continuation/divisional with Box 16 comp | . § 1.65(C leted) | Statement filed in prior application |
| i. DELETION OF INVENTOR(S) | - 4: | (PTO/SB/09-12) Status still proper and desired Certified Copy of Priority Document(s) |
| Signed statement attached del inventor(s) named in the prior ap | - | 114.1 |
| see 37 C.F.R. §§ 1.63(d)(2) and | 1.33(b). | 15. X Other: Small entity Assertion and |
| * NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMA FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27) | LL ENTITY | check in the amount of \$364.00 |
| IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C F.R. | § 1.28) | |
| 16. If a CONTINUING APPLICATION, check appropriate | box, and si | supply the requisite information below and in a preliminary amendment: |
| Continuation Divisional Continuation | n-in-part (C | • • |
| Prior application information: Examiner | sclosure | Group / Art Unit: e of the prior application, from which an oath or declaration is supplied |
| under Box 4b, is considered a part of the disclosure of the a | ccompany | nying continuation or divisional application and is hereby incorporated by |
| | | has been inadvertently omitted from the submitted application parts. ENCE ADDRESS |
| 17. CORRES | PONDE | ENGL ADDRESS |
| Customer Number or Bar Code Label (Insert Customer | No. or Atta | or X Correspondence address below tach bar code label here) |
| Peter Dilworth | | |
| | | |
| Address Dilworth & Barrese | | |
| 333 Earle Ovington Blvd. | | NY Zip Code 11553 |
| City Uniondale Country U.S. Telepi | State | NY Zip Code 11553 (516) 228-8484 Fax (516) 228-8516 |
| Country U.S. Telepi | iulie | |
| Name (Print/Type) Russell R. Kassner | _ | Registration No (Attorney/Agent) 36,183 |

CERTIFICATION UNDER 37 C.F.R. §1.10 I hereby certify that this correspondence and the documents referred to as enclosed are being deposited with the United States Postal Service on date below in an envelope as "Express Mail Post Office to Addressee" Mail Label Number EL765222306US addressed to: Assistant Commissioner for Patents, Box Patent Application, Washington, D.C. 20231.

March 9, 2001

Russell R. Kassner

Deposit Account

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04-1121

3/9/2001

Date

PTO/SB/17 (12-98)
Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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FEE TRANSMITTAL for FY 1999

Patent fees are subject to annual revision. Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

(\$) 364.00 TOTAL AMOUNT OF PAYMENT

| Complete if Known | | | | |
|----------------------|-------------------------|--|--|--|
| Application Number | | | | |
| Filing Date | March 9, 2001 | | | |
| First Named Inventor | Arthur A. Alfaro et al. | | | |
| Examiner Name | | | | |
| Group / Art Unit | | | | |
| Attorney Docket No. | 285-148 | | | |

| METHOD OF PAYMENT (check one) | FEE CALCULATION (continued) | | | | | |
|--|---|---|--|------------|--|--|
| 3. ADDITIONAL FEES | | | | | | |
| 1. X The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: | Large Entity Small Entity Fee | | | | | |
| Deposit | | ode (\$) | Description | Fee Paid | | |
| Account Number 04-1121 | 105 130 20 | 5 65 Surcharge - late | filing fee or oath | | | |
| Deposit Account Name | 127 50 22 | 7 25 Surcharge - late cover sheet. | provisional filing fee o | or | | |
| Charge Any Additional | 139 130 13 | 9 130 Non-English sp | ecification | | | |
| Fee Required Under 37 CFR 1.16 and 1.17 | 147 2,520 14 | 7 2,520 For filing a requ | est for reexamination | | | |
| 2. X Payment Enclosed: | 112 920* 1 ⁻ | | Requesting publication of SIR prior to Examiner action | | | |
| Check Money Other | 113 1,840* 1 [.] | 13 1,840* Requesting pub Examiner action | lication of SIR after | | | |
| FEE CALCULATION | 115 110 21 | 5 55 Extension for re | ply within first month | | | |
| | 116 380 21 | 6 190 Extension for re | ply within second mont | th | | |
| 1. BASIC FILING FEE Large Entity Small Entity | 117 870 21 | 7 435 Extension for re | ply within third month | | | |
| Fee Fee Fee Fee Description | 118 1,360 21 | 8 680 Extension for re | ply within fourth month | | | |
| Code (\$) Code (\$) Fee Paid 101 760 201 380 Utility filing fee \$355.00 | 128 1,850 22 | 8 925 Extension for re | ply within fifth month | | | |
| , , , | 119 300 21 | 9 150 Notice of Appea | ıl | | | |
| · · · | 120 300 22 | 0 150 Filing a brief in | support of an appeal | | | |
| | • | 1 130 Request for ora | l hearing | | | |
| | 138 1,510 13 | 8 1,510 Petition to instit | ute a public use procee | eding | | |
| 114 150 214 75 Provisional filing fee | 140 110 24 | Dotition to multi- | e - unavoidable | | | |
| SUBTOTAL (1) (\$) 355.00 | | 1 605 Petition to reviv | e - unintentional | | | |
| 2. EXTRA CLAIM FEES | 142 1,210 24 | 2 605 Utility issue fee | (or reissue) | | | |
| Fee from Extra Claims below Fee Paid | 143 430 24 | 3 215 Design issue fe | 9 | | | |
| Total Claims 21 -20** = 1 x \$9 = \$9 | 144 580 24 | 4 290 Plant issue fee | | | | |
| Independent 3 - 3** = 0 x \$40 = \$0 | 122 130 12 | 2 130 Petitions to the | Commissioner | | | |
| Multiple Dependent \$130 = | 123 50 12 | 3 50 Petitions related | to provisional applicat | ions | | |
| **or number previously paid, if greater; For Reissues, see below | 126 2 40 12 | 6 240 Submission of I | nformation Disclosure S | Stmt | | |
| Large Entity Small Entity Fee Fee Fee Fee Fee Description Code (\$) Code (\$) | 581 40 58 | Recording each | patent assignment per number of properties) | , | | |
| 103 18 203 9 Claims in excess of 20 | 146 760 24 | | sion after final rejection | | | |
| 102 78 202 39 Independent claims in excess of 3 | 149 760 24 | | onal invention to be | | | |
| 104 260 204 130 Multiple dependent claim, if not paid | | examined (37 C | | | | |
| 109 78 209 39 ** Reissue independent claims over original patent | Other fee (specify | v) | | _ | | |
| 110 18 210 9 ** Reissue claims in excess of 20 and over original patent | Other fee (specify) | | | | | |
| SUBTOTAL (2) (\$) 9.00 | Reduced by Bas | sic Filing Fee Paid | SUBTOTAL (3) | b) | | |
| SUBMITTED BY Complete (if applicable) | | | | | | |
| The state of the s | | | | | | |
| Printed Name Russell R. Kassner Reg. 1 | | | | 36,183 | | |

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Dated: March 9, 2001

Signature

Russell R. Kassner